

# Brent Health and Wellbeing Board 30 October 2023



# Report from the Corporate Director of Resident Services

# Lead Cabinet Member - Cllr Krupa Sheth

# Air Quality Action Plan and Public Health

Wards Affected:	All
Key or Non-Key Decision:	Key
Open or Part/Fully Exempt: (If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)	Open
List of Appendices:	Appendix A - Air Quality Action Plan – Full version Appendix B - Consultation Report for the Draft Air Quality Action Plan
Background Papers:	None
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#### 1.0 Executive Summary

- 1.1 The London Borough of Brent (LBB) recognises that air pollution remains a significant problem and is committed to taking action to improve air quality and raise awareness of its impacts, especially amongst our most vulnerable residents.
- 1.2 Brent's Air Quality Action Plan (2023–2027) (AQAP) (Appendix A) outlines thirty-seven measures the Council will undertake, in partnership with others, to reduce levels of two key air pollutants; nitrogen dioxide (NO2) and particulate matter (PM10 and PM2.5), both known to be harmful to health. The measures are split into five themes; Theme 3 is "Public health and awareness raising".
- 1.3 The AQAP also proposes the extension of Brent's Air Quality Management Area (AQMA) to cover the entire borough. AQAPs are developed to manage pollution within AQMAs; extending the boundary of Brent's AQMA has the benefit of ensuring the AQAP is applicable to the whole borough and also

- reflects that, despite improvements, pollution across the whole of the borough needs to continue to be reduced.
- 1.4 Both the Director of Public Health and Director of Environment and Leisure are signatories of the AQAP demonstrating shared responsibility for driving down pollution and reducing exposure in the borough.
- 1.5 Consultation on the draft AQAP was agreed by Individual Cabinet Member Decision on 13 March 2023. Since then, the action plan has been subject to public consultation. Over 400 people were spoken with, and 92 members of our community responded to the consultation (Appendix D). Feedback from the consultation was used to adjust the plan where appropriate.
- 1.6 The target date for publication of the plan is 12<sup>th</sup> December 2023, after it has received approval from Cabinet. The new plan will supersede the previous AQAP (2017-2022). Work will be undertaken to provide detailed implementation plans outlining how each air quality action plan measure will be delivered.
- 1.7 The purpose of this report is to update the Health and Wellbeing Board (HWB) on the status of the AQAP and to acknowledge the critical role that health partners can play in the delivery of the AQAP and improving health outcomes through reducing pollution and raising awareness of its impacts.

#### 2.0 Recommendation(s)

- 2.1 That the HWB notes the Final Air Quality Action Plan (2023-2027) (Appendix A), with particular attention to the actions within Theme 3 "Public health and awareness raising" (page 65-76).
- 2.2 That the HWB considers how health partners can contribute to reducing pollution and raising awareness, especially with vulnerable patients, including through the delivery of the AQAP.
- 2.3 That the HBB considers how health partners can engage with stakeholders on air pollution to improve health outcomes.
- 2.4 That the HWB notes the next steps and timescales for adopting the AQAP and the extension of the Air Quality Management Area (AQMA) order.

#### 3.0 Detail

# 3.1 Background

3.1.1 Progress has been made in reducing air pollution concentrations across the borough for the key pollutants (NO2, PM10, and PM2.5). However, some areas in the borough are still exceeding the legal limits for NO2 and most of the borough exceeds the new PM2.5 limit set by government in 2023. Moreover, pollution levels across the whole borough are higher than the health-based World Health Organisation (WHO) guidelines.

- 3.1.2 Therefore, despite some improvements, air pollution continues to harm our health and economy and worsen inequalities. Research has enabled a deeper understanding of the harm pollution can cause to all our health, even at low levels. With Brent's existing AQAP expiring at the end of 2022, a review of the plan has been undertaken. This review resulted in a new draft of the AQAP (2023-2027), which was consulted on in Spring 2023. A proposed final version of the AQAP is presented in Appendix A.
- 3.1.3 Air pollution is the largest environmental threat to public health in the UK. Exposure to air pollution is estimated to cause 36,000 premature deaths each year<sup>1</sup>. In 2019, 4,100 deaths in London were caused by air pollution, 149 of these were in Brent. Outer London boroughs (such as Brent) suffer a higher mortality burden from air pollution, as a proportion of the population, than inner London boroughs<sup>2</sup>. This, in part, is due to a higher proportion of elderly people in these areas and asthma rates. Collectively, PM2.5 and NO2 are responsible for 8.3% of all deaths in Brent<sup>3</sup>.
- 3.1.4 Even where the outcome is not mortality, pollution affects the quality of life of all residents and their future health outcomes, contributing to the development of asthma, heart disease, cancer, and dementia even if someone does not have underlying health conditions. For those living with particulate pollution that is worse than the 2040 England target, there is an extra 20% chance of having multiple long-term illnesses (researchers looked at more than 360,000 people aged between 40 and 69 who had health data in the UK Biobank). They found greater chances of multiple neurological, respiratory, cardiovascular and common mental health conditions such as depression and anxiety, even having allowed for differences in income<sup>4</sup>.
- 3.1.5 This has an economic impact on the health and care system; the 2019 Clean Air Strategy<sup>5</sup> estimated air pollution in England could cost £5.3bn a year in terms of health and social care by 2035 if no action is taken. This is a cumulative cost for health conditions strongly associated with air pollution: coronary heart disease; stroke; lung cancer; and childhood asthma. When wider health conditions associated with pollution are added, the costs could reach £18.6bn by 2035. These include chronic obstructive pulmonary disease; diabetes; low birth weight; and dementia.

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<sup>&</sup>lt;sup>1</sup> Air pollution: applying All Our Health - GOV.UK (www.gov.uk)

<sup>&</sup>lt;sup>2</sup> <u>Dajnak, D., Evangelopoulos, D., Kitwiroon, N., Beevers, S.D. and Walton, H., 2021.</u> <u>London health burden of current air pollution and future health benefits of mayoral air quality policies. *City Hall.*</u>

<sup>&</sup>lt;sup>3</sup> GLA Air Quality in LB Brent: A Guide for Public Health Professionals (2022)

<sup>&</sup>lt;sup>4</sup> Ronaldson, A., Arias de la Torre, J., Ashworth, M., Hansell, A.L., Hotopf, M., Mudway, I., Stewart, R., Dregan, A. and Bakolis, I., 2022. Associations between air pollution and multimorbidity in the UK Biobank: A cross-sectional study. *Frontiers in Public Health*, *10*, p.1035415.

<sup>&</sup>lt;sup>5</sup> Clean Air Strategy 2019

- 3.1.6 It is known that some people are more susceptible to the impacts of pollution, exacerbating inequalities. This includes:
  - People with existing health conditions, such as asthma and heart disease
  - Children
  - Elderly
  - Pregnant women
  - Communities in areas of higher pollution, such as close to busy roads
- 3.1.7 With respect to inequalities, the GLA have found that the most deprived communities of London still more commonly live in the most polluted areas and the areas in London with the lowest NO2 and PM2.5 concentrations have a disproportionately white population. Furthermore, the inequalities in exposure to air pollution experienced between ethnic groups are more pronounced in Outer London boroughs (figure 1 and 2); in Outer London, the lowest NO2 concentration decile comprises a 71% white population, whereas in Inner London, the lowest NO2 concentration decile is 56% white, in 2019.6.

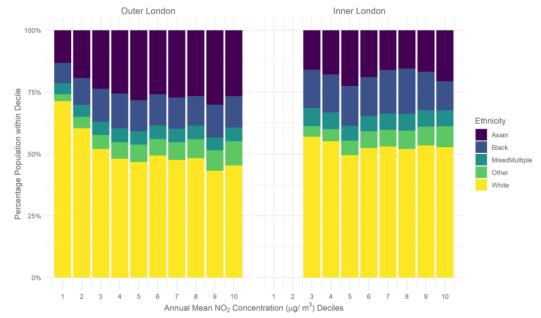


Figure 1. Percentage of population of each ethnicity group by NO2 Concentration deciles for Outer and Inner London in 2019

<sup>&</sup>lt;sup>6</sup> Greater London Authority air quality exposure and inequalities study (2023)

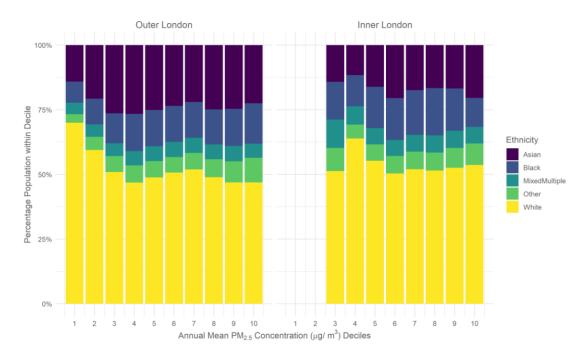


Figure 2. Percentage of population of each ethnicity group by PM2.5 concentration deciles for Outer and Inner London in 2019

- 3.1.8 In Brent, there are 18,537 people who suffer with asthma, 2,409 of whom are children. In 2022, 168 0-14 year olds were admitted to hospital for asthma and 340 65+ for asthma or COPD (WSIC DID, 2023). The tragic passing of nine-year-old Ella Adoo-Kissi-Debrah, who is the first person to have air pollution listed as a cause of death after suffering a fatal asthma attack, illuminates the importance of tackling pollution; it can save the lives of the most vulnerable in our society. The Prevention of Future Deaths report<sup>7</sup> stated that: "Ella's mother was not given information by health professionals about the health risks of air pollution and its potential to exacerbate asthma. If she had been given this information she would have taken steps which might have prevented Ella's death." The report concluded that national and local government, as well as medical and nursing professionals, have a role to play in bringing about greater awareness of pollution levels and communicating the adverse health effects of pollution.
- 3.1.9 The AQAP acknowledges the scale of this issue and sets out what we can and will do, both on our own and in partnership with others, to secure a future for Brent in which our air is as clean as it can possibly be. It outlines the Councils' strategy for reducing local emissions of NO2 and PM. This is a legal duty, a requirement under the Environment Act 1995, as amended 2021; all local authorities must publish and regularly review their action plan once an AQMA has been declared.
- 3.1.10 The London Local Air Quality Management (LLAQM) regime is the regional mechanism for determining compliance with our legal duties. The Council will be expected to provide annual updates and demonstrate progress with the air

<sup>&</sup>lt;sup>7</sup> REGULATION 30: ACTION TO PREVENT FUTURE DEATHS (judiciary.uk)

- quality objectives outlined in the plan to the Mayor of London. This is the minimum requirement for all London authorities.
- 3.1.11 The AQAP comprises thirty-seven measures, across five themes, which the council will implement to tackle local air pollution at source as well as raise awareness of the health impacts amongst Brent residents (see Appendix A for the AQAP). There are 16 actions which have been identified as a priority (Appendix A page 7); they have been selected through consultation and as they will deliver the greatest impact in pollution reduction and awareness raising over the next five years.
- 3.1.12 Theme 3 "Public Health and Awareness Raising" (page 65-76 in Appendix A) contains nine actions detailing how the Council will work with health professionals, as well as other partners with access to vulnerable community members such as schools, to empower those who are most vulnerable to the health impacts of air pollution by providing good quality information.
- 3.1.13 In addition, through a detailed review of air quality data across the borough in relation to the Air Quality Objectives and World Health Organisation guidelines, the AQAP provides an update to Brent's Air Quality Management Area (AQMA) (to be extended to cover the whole borough) and Air Quality Focus Areas (AQFAs), which are defined as pollution hotspots where there are also high levels of population exposure (e.g. town centres).
- 3.1.14 Once approved by Cabinet, this plan will supersede our previous action plan published in 2017.

#### 4.0 Stakeholder engagement

- 4.1 The AQAP was developed using community outreach, an internal officer Air Quality Steering Group, a review of air quality data for the borough conducted by WSP Ltd, and Action Planning workshops held with council officers and external stakeholders where relevant (e.g., TfL, NHS North West London Integrated Care Board, Central and North West London NHS Foundation Trust, and Brent CVS). Further details on this methodology are included in Section 4 of Appendix A. In addition to this, the London Local Air Quality Management System (LLAQMS) was used as a framework for developing the plan and actions.
- 4.2 At the outset of the AQAP development process in October 2021, community outreach was undertaken to understand the priorities of people who work and live in Brent. The primary goal was for residents to have their say on deciding the priorities of draft AQAP. Led by Kaizen Partnerships Ltd, this engagement took place over 27 days in twenty-one locations within Brent, including all Town Centres and all GLA 2016 AQFAs. Interviews were designed to target residents that might ordinarily miss out on environmental messaging, particularly amongst disproportionately affected groups or the digitally excluded. An online survey also allowed residents not involved in the focus groups to voice their concerns. 94% of people engaging via outreach saying

- that their views had never been consulted before (83%) or not much before (11%). 488 people gave their views which fed into the draft AQAP.
- 4.3 Once developed, the draft AQAP was subject to public consultation, following an Individual Cabinet Member Decision on 13 March 2023. An online survey was live for six weeks and was promoted as detailed in the consultation report in Appendix B. Pop-up events took place at a range of locations across the borough, along with presentations at community forums to inform the local community about the draft plan and signpost to the online survey.
- 4.4 The consultation was circulated to Brent's Health and Wellbeing Board on 17 April 2023 and to medical practices through the NHS North West London Integrated Care Board on 3 April 2023.
- 4.5 In total over 400 people interacted with the engagement team during pop-up events and were informed about the draft AQAP and how to share their views. 92 people gave their views either online or on a paper questionnaire with the following headline views:
  - 62% of people responded positively (saying "Love it" or "Like it") to the Council's vision statement around air quality
  - 71% believe that Core Aim 1 "Reduce Pollutions Concentrations" should be the main priority
  - 57% thought that "Discourage unnecessary engine idling" would be the most impactful proposed action, followed by "Provide infrastructure to support walking and cycling" (56%)
  - Overall, only 10% of people who gave their views expressed a negative opinion of the draft plan. 40% of people expressed a positive view, 41% said "it's OK", and 8% weren't sure.
- 4.6 In response to the consultation, the key changes that have been made to the Air Quality Action Plan are:
  - Changing the prioritisation of the actions to reflect resident priorities
  - Adding a new action (CT12) Encourage walking and cycling in the borough by providing support to reflect the need to provide services to enable more walking and cycling
  - Additional actions to work more closely with the Canal & River Trust
  - More specific information on which greening projects we expect to deliver

#### 5.0 Financial Considerations

5.1 The AQAP will be delivered within existing budgets and funding structures where possible. Additional funds can be applied for when grant opportunities arise, such as through the Defra Air Quality Grant.

#### 6.0 Legal Considerations

6.1 The Council has a statutory duty to comply with the requirements of the Environment Act 1995, as amended by Environment Act 2021. This states

that all local authorities must publish an air quality action plan, working with Air Quality Partners, once they have declared an Air Quality Management Area and continue to review and assess local air quality until national targets are met.

- 6.2 Governance of this regime for London local authorities has been devolved to the Mayor. As a result, the council must demonstrate compliance with the London Local Air Quality Management (LLAQM) regime and provide regular updates regarding compliance with Air Quality Objectives to the London Mayor.
- 6.3 This AQAP is therefore a statutory document and has been produced as part of our duty to LLAQM. It has been developed in recognition of the legal requirement on the local authority to work towards Air Quality Objectives Part IV of the Environment Act 1995 (as amended by the Environment Act 2021) and relevant regulations made under that part and to meet the requirements of the London Local Air Quality Management statutory process.

## 7.0 Equality, Diversity & Inclusion (EDI) Considerations

- 7.1 S149 of the Equality Act 2010 provides that the Council must have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between those who share a protected characteristic, and those who do not.
- 7.2 Inequalities in exposure to air pollution exist across the UK. Analysis has demonstrated that areas characterised by deprivation tend to pollute the least and yet are exposed to higher levels of pollution (Air Quality Management Resource Centre, 2019). Furthermore, vulnerable citizens (children, elderly or those in ill-health) are at greater risk of being harmed by poor air quality.
- 7.3 Projects linked to reducing local air pollution are critical to address these environmental and health inequalities.
- 7.4 An Equalities Impact Assessment is being conducted for the AQAP.
- 7.5 Following assessment, it is considered that, on balance, the significant benefits that the objectives and measures within the AQAP will bring, including those to protected characteristics, will significantly outweigh any disbenefits to these groups. However, where negative impacts have been identified, it is anticipated that these can be addressed, or mitigated, as projects and schemes are further developed. A requirement to engage closely with local communities, our partners and a wide range of stakeholders at all stages of project development will ensure this.

## 8.0 Climate Change and Environmental Considerations

8.1 The Air Quality Action Plan directly supports the Council's environmental objectives and climate emergency strategy.

8.2 Many of the sources of outdoor air pollution are also sources of carbon dioxide emissions. For example, using fossil fuels for power generation, industry, and transport are all major sources of both particulate matter, nitrogen dioxide and carbon dioxide. Therefore, tackling these sources for improvements in air quality will also complement the climate emergency strategy.

## 9.0 Communication Considerations

9.1 Once the AQAP has been adopted, it will be published online. Relevant stakeholders will be notified via a communications plan which is in development.

## Report sign off:

Peter Gadsdon

Corporate Director of Resident Services